1275362



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR INIFORM LIMITED OFFERING EXEMPTI

OMB	APPR	OVAL				
		<del></del>				
OMB Num	ber:	3235-00	076			
Expires:	April	30,200	8			
	verso	e burden				
Unn		16	.00			
07052037						

UNIFORM LIMITED OFFERING EXEM	IPTION
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Series B Preferred Share Financing	
Filing Under (Check box(es) that apply): Rule 504 📝 Rule 505 🗌 Rule 506 📋 Section 4(6 Type of Filing: 📋 New Filing 📝 Amendment	) ULOE
A, BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Alta Analog, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1737 North First Street, #620, San Jose, CA 95112	408-871-0202
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	···· · · · · · · · · · · · · · · · · ·
Computer hardware, namely analog integrated circuit chips storing analog values used for	control, calibration or recording functions.
Type of Business Organization  Corporation  Imited partnership, already formed  business trust  limited partnership, to be formed	please specify): PROCESSE
Month Year  Actual or Estimated Date of Incorporation or Organization: 0 3 0 2 Actual Esti  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Stat  CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	(1100)
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given by which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	0549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual photocopies of the manually signed copy or bear typed or printed signatures.	lly signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supported by filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for a ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall
accompany this form. This notice shall be filed in the appropriate states in accordance with state law this notice and must be completed.	. The Appendix to the notice constitutes a part of

appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the

filing of a federal notice.

### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter Executive Officer General and/or Check Box(es) that Apply: ■ Beneficial Owner Director Managing Partner Full Name (Last name first, if individual) Orlando, Rick Business or Residence Address (Number and Street, City, State, Zip Code) 1737 North First Street, #620, San Jose, CA 95112 Check Box(es) that Apply: General and/or Promoter | Beneficial Owner | Executive Officer | Director Managing Partner Full Name (Last name first, if individual) Blyth, Trevor Business or Residence Address (Number and Street, City, State, Zip Code) 1737 North First Street, #620, San Jose, CA 95112 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director General and/or Managing Partner Full Name (Last name first, if individual) Reddy, C.N. Business or Residence Address (Number and Street, City, State, Zip Code) 2575 Augustine Drive, Santa Clara, CA 95054 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Alliance Ventures, III, LP Business or Residence Address (Number and Street, City, State, Zip Code) 2575 Augustine Drive, Santa Clara, CA 95054 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Galaxy Venture Partners, III, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 2575 Augustine Drive, Santa Clara, CA 95054 Check Box(cs) that Apply: Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					В. П	NFORMAT	ION ABOU	T OFFERI	NG				
-	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										Yes	No E2	
١.	mas the	issuer son	a, or does i			n, to non-a Appendix					>		
2.											\$		
											Yes	No	
3.						le unit?							X
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
	Full Name (Last name first, if individual) N/A.												
		Residence	Address (N	Number and	i Street, C	ity, State, 2	Lip Code)			<del>.</del>			
					<u>-</u> .				<del>-</del>				···
Naı	me of As	sociated Bi	roker or De	aler									
Sta	tes in Wi	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers	<del></del>					
	(Check	"All State:	s" or check	individual	States)			***************************************				☐ Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	[ID]
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	(OK)	OR WY	PA PR
		<u> </u>				<u> </u>		<u> </u>		17. 7		[IV 1]	
Full Name (Last name first, if individual)													
Bus	siness or	Residence	: Address (	Number an	d Street, C	City, State, 2	Zip Code)						
NT			roker or De				•					<u>-</u>	
Nai	me of As:	sociated Bi	roker of De	aier									
Sta						to Solicit l							·
	(Check	"All States	s" or check	individual	States)		•••••				•••••••••••••••••••••••••••••••••••••••	□ VI	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	NE)	IA DIVI	KS	(KY)	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV]	NH TN	UN TX	NM UT	NY) VT)	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Ful			first, if ind										
		sast manie	msi, m mu	1414441)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State, 7	Zip Code)						
Nar	me of As	sociated Br	oker or De	aler									
			**		<del></del>								
Sta						to Solicit l						□ Δ1	l States
	AL TL	AK) IN	[AZ]	[KS]	CA KY	CO LA	CT]	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK.	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VÄ	WA	WV	WI	WY	PR

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

J.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, che this box \( \) and indicate in the columns below the amounts of the securities offered for exchange at already exchanged.	ck nd	A
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt		\$
	Equity	\$ 3,960,000.00	<u>\$_336,411.60</u>
	Convertible Securities (including warrants)		0.00 \$
	Partnership Interests		\$ 0.00
	Other (Specify)		\$ 0.00
	Total	3,960,000.00	s 336,411.60
	Answer also in Appendix, Column 3, if filing under ULOE.		· ·
2.	Enter the number of accredited and non-accredited investors who have purchased securities in the offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicated the number of persons who have purchased securities and the aggregate dollar amount of the purchases on the total lines. Enter "0" if answer is "none" or "zero."	te cir Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$ 3,336,411.60
	Non-accredited Investors	_	\$_0.00
	Total (for filings under Rule 504 only)	··	\$
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities old by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question I	he	
	Type of Offering	Type of Security Preferred B	Dollar Amount Sold
	Rule 505		\$ 3,336,411.60
	Regulation A		\$ 0.00
	Rule 504		\$ 0.00
	Total		s 3,336,411.60
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of t securities in this offering. Exclude amounts relating solely to organization expenses of the insure. The information may be given as subject to future contingencies. If the amount of an expenditure not known, furnish an estimate and check the box to the left of the estimate.	er.	
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	<b>Z</b>	\$_25,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		s
	Other Expenses (identify)	_	s
	Total	_	§ 25,000.00

	C. OFFERING PRICE	E, NUMBER OF INVESTORS, EXPEN	NSES AND USE OF PROCEEDS	
	b. Enter the difference between the aggreg and total expenses furnished in response to P proceeds to the issuer."	art C — Question 4.a. This difference	is the "adjusted gross	s3,935,000.00
5.	Indicate below the amount of the adjusted geach of the purposes shown. If the amour check the box to the left of the estimate. The proceeds to the issuer set forth in response	nt for any purpose is not known, furr e total of the payments listed must equ	nish an estimate and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees			<b>✓</b> \$_300,000.00
	Purchase of real estate			
	Purchase, rental or leasing and installation and equipment			
	Construction or leasing of plant buildings		\$ 200,000.00	
	Acquisition of other businesses (including offering that may be used in exchange for issuer pursuant to a merger)	his		
	Repayment of indebtedness		<del>-</del>	_
	Working capital		_	
	Other (specify):			s
			[] <b>\$</b>	s
	Column Totals		<u>\$</u> 3,435,000.0	0 \$ 500,000.00
	Total Payments Listed (column totals adde	ed)		935,000.00
		D. FEDERAL SIGNATU	JRE	
sig	issuer has duly caused this notice to be signe nature constitutes an undertaking by the issu information furnished by the issuer to any	er to furnish to the U.S. Securities an	d Exchange Commission, upon writte	
Issi	ner (Print or Type)	Signature	Date	
Alt	a Analog, Inc.			
	ne of Signer (Print or Type) cander P. Myers	Title of Signer (Print or Ty Legal Counsel.	rpe)	

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification	Yes	No
	provisions of such rule?	<u>[]</u>	<u>K</u>

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Alta Analog, Inc.	at B_	april 10, 2007
Name (Print or Type)	Title (Print or Type)	
Alexander P. Myers	Legal Counsel.	

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

### **APPENDIX** 2 3 4 l Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate offering price Type of investor and explanation of to non-accredited amount purchased in State waiver granted) investors in State offered in state (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) Number of Number of Non-Accredited Accredited Investors Investors Amount Yes No State Yes No Amount AL ΑK AZAR Preferred, Ser. B X CA 13 \$3,336,411. X CO CTDE DC FL $\mathsf{G}\mathsf{A}$ НІ ID IL IN ĪΑ KS KY LA ME MD MAΜI MN MS

## APPENDIX 2 l 3 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate explanation of offering price Type of investor and to non-accredited amount purchased in State (Part C-Item 2) waiver granted) offered in state investors in State (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Accredited Non-Accredited Yes No Investors Investors Amount State Yes No Amount MO MT NE NVNH NJ NM NY NC ND ОН OK OR PA RI SC SD TN TX UT VT VA WA wv WI

	APPENDIX										
1	1 2 3 4 Type of security							5 Disqualification under State ULOE			
	to non-a	to sell ccredited s in State -Item 1)	and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			(if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY											
PR											

